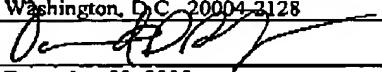


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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/010,155
		Filing Date 12/10/2001
		First Named Inventor Gerd M. MÜLLER et al.
		Group Art Unit 2646
		Examiner Name P.L. Dabney
Total Number of Pages in This Submission 12		Attorney Docket Number 740105-81

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	David S. Safran, Reg. No. 27,997 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-3128
Signature	
Date	December 23, 2005

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FEE TRANSMITTAL FOR FY 2005 <small>Patent fees are subject to annual revision.</small>		<i>Complete If Known</i>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 10/010,155	
		Filing Date 12-10-2001	
		First Named Inventor Gerd M. MÜLLER et al.	
		Examiner Name Dabney	
		Art Unit 2646	
TOTAL AMOUNT OF PAYMENT (\$120.00)		Attorney Docket No. 740105-81	

METHOD OF PAYMENT (check all that apply)		FEES CALCULATION (continued)																																																																																											
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Name (Print/Type)	David S. Saffan	Registration No. (Attorney/Agent)	27,997																																																																																										
Signature		Telephone	703-584-3270-																																																																																										
		Date	December 23, 2005																																																																																										

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